STATEMENT OF

FORM 1		ORGANIZATION					Offic	e Use Only	
NAME OF COMMITTEE (ir	n full)	(Check is change		Example over the	e:If typing, type lines.		4M5		
NORTH D	ĄĶOŢĄ	A HORSI	E ASS	OCIA	TION	111.11	.1 1 1	LL_L_L	
	1 1 . 1 . 1				 				
ADDRESS (number a	and street)	1504 S.	Houst	on St	reet	1 1 1 1 1	1 1 1	1 1 1 1	
(Check if address is changed)		Kaufma			<u> </u>	TX	75	142	
			С	ITY		STATE		ZIP COI)E
COMMITTEE'S E-MA		s (Please provide northda				oր@gm	ail.cor	$\mathfrak{p}_{\perp\perp\perp}$	
(Check if address is changed)				111	1.1.1.1.1.		<u> </u>	<u> </u>	لىينى
(Check if is change		<u>μοττή αξ</u>	акота п		associat	ion.ţum	 Dir ₁ co	<u>m</u>	
3. FEC IDENTIFIC	CATION NU	MBER	c 00	5267	56				
4. IS THIS STATE	MENT	NEW (N)	OR	\boxtimes	AMENDED (A	A)			
I certify that I have	examined thi	s Statement and	to the best	of my kno	wiedge and bei	lief it is true, d	correct and	complete.	
Type or Print Name	of Treasurer	Julie C	arama	nte			······································		
Signature of Treasur	er	Julie	Caro	m	ante	Date	10"	10" ′	2012
NOTE: Submission of		ous, or incomplete						enalties of 2	U.S.C. §437g.
Office Use				Fee	r further informat deral Election Com Free 800-424-953	nmission	F	FEC FOR	